

ISSUE SLIP STAPLE AREA (for additional sheet references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MD		10-717-01
O.I.P.E. CLASSIFIER	PN	32	10/31
FORMALITY REVIEW	SMT	1085	10-15-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1 9	2
21 22	
2 21 22	✓
3 ✓	
4 ✓	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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